UNITED STATES DISTRICT COURT

for the

| Eastern District of Tennessee | ਓ | | | |
|---|--|--|--|--|
| Kolby Duckett, David Schilling, and David Holloway | | | | |
| Plaintiff) | 4.40 00005 | | | |
| v.) Civil Ac | tion No. 1:19-cv-00295 | | | |
| Chief Brian Hickman, Ted Rogers, and the City of Collegedale, Tennessee | | | | |
| Defendant) | | | | |
| SUBPOENA TO TESTIFY AT A DEPOSITION IN A CIVIL ACTION | | | | |
| o: Kristen Boyd - c/o Keith H. Grant Robinson, Smith & Wells, PLLC 633 Chestnut Street, Suite 700, Chattanooga, TN 37450 | | | | |
| Robinson, Smith & Wells, PLLC 633 Chestnut Street, Suite 700, Chattanooga, TN 37450 (Name of person to whom this subpoena is directed) | | | | |
| Testimony: YOU ARE COMMANDED to appear at the time, date, and place set forth below to testify at a deposition to be taken in this civil action. If you are an organization, you must designate one or more officers, directors, or managing agents, or designate other persons who consent to testify on your behalf about the following matters, or those set forth in an attachment: | | | | |
| Place: Robinson, Smith & Wells, PLLC 633 Chestnut Street, Suite 700 Date an | d Time: | | | |
| Chattanooga, TN 37450 | 09/11/2020 9:30 am | | | |
| The deposition will be recorded by this method: Stenographic means before a court reporter | | | | |
| Production: You, or your representatives, must also bring with you electronically stored information, or objects, and must permit inspermaterial: | | | | |
| The following provisions of Fed. R. Civ. P. 45 are attached – Rule Rule 45(d), relating to your protection as a person subject to a subpoena; an respond to this subpoena and the potential consequences of not doing so. | 45(c), relating to the place of compliance; d Rule 45(e) and (g), relating to your duty to | | | |
| Date: 8.12.20 | | | | |
| CLERK OF COURT | | | | |
| OR | ************************************** | | | |
| | MANA L. LOOKAN | | | |
| Signature of Clerk or Deputy Clerk | Attorney's signature | | | |
| The name, address, e-mail address, and telephone number of the attorney re | MI | | | |
| | who issues or requests this subpoena, are: | | | |
| Janie Parks Varnell, DAVIS & HOSS, P.C., 850 Fort Wood Street, Chattanooga, TN 37403 (423) 266-0605 | | | | |
| Notice to the person who issues or requests this subpoena If this subpoena commands the production of documents, electronically stored information, or tangible things before | | | | |

trial, a notice and a copy of the subpoena must be served on each party in this case before it is served on the person to

whom it is directed. Fed. R. Civ. P. 45(a)(4).

Civil Action No. 1:19-cv-00295

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 45.)

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|-------------------------|---------------------------|-------------------------|--|-----------------|
| | | Or | (date) ; 0 | r |
| ☐ I returned the | subpoena unexecuted b | pecause: | | |
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| \$ | · | | | |
| y fees are \$ | for travel | and \$ | for services, for a total of | \$ 0.00 |
| | | | | |
| I declare under p | enalty of perjury that th | is information is true. | | |
| | | 110 | Wan | |
| ite: 8, 20, 2021 | 1 | THE | | |
| ate: <u>8, 20, 2021</u> | | THE | Server's signature | |
| ate: <u>8, 20, 2021</u> | | Holey 10 | Server's signature Peraless Printed name and title | 1 |

Additional information regarding attempted service, etc.:



850 Fort Wood Street Chattanooga, TN 37403 CERTIFIED MAIL



7017 0190 0000 2994 1934

Keith H. Grant ROBINSON, SMITH & WELLS, PLLC 633 Chestnut Street, Suite 700 Chattanooga, TN 37450

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|---------|---|------------------------------|--|--|--|
| -7 | For delivery information, visit our website | at www.usps.com | | | |
| <u></u> | UFFICIAL | USE | | | |
| 근무되나 | Certified Mail Fee | | | | |
| TU. | Extra Services & Fees (check box, add fee as appropriate) | | | | |
| | Heturn Receipt (hardcopy) \$ | | | | |
| | Return Receipt (electronic) \$ | Postmark | | | |
| 0000 | Adult Signature Required \$ | Here | | | |
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| 7017 | Sent To Value to Call | | | | |
| 0 | Street and Apt. No., or PO Box No. | | | | |
| r- | City, State, 218-40 TN 37450 | | | | |
| | | | | | |
| | PS Form 3800, April 2015 PSN 7530-02-000-9047 | See Reverse for Instructions | | | |

SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature ■ Complete items 4, 2, and 3. Agent Print your name and address on the reverse so that we can veturn the card to you. X KGRS4WI ☐ Addressee Attach this card to the back of the mailpiece, or on the front if space permits. B. Received by (Printed Name) C. Date of Delivery 8.11.90 1. Article Addressed to: D. Is delivery address different from item 1? ☐ Yes No. If YES, enter delivery address below: Kristen Bayd C/o Keith H. Erent Rabilion, Snih + Wells PLLC 633 Chertnet Street, Suit 700 3. Service Type La Adult Signature ☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☐ Return Receipt for Merchandise ☐ Adult Signature Restricted Delivery Certified Mail® ☐ Certified Mail Restricted Delivery 9590 9402 3083 7124 8610 69 ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation™ ☐ Signature Confirmation ☐ Restricted Delivery 2. Article Number (Transfer from service label) sured Mail ured Mail Restricted Delivery er \$500) 7017 0190 0000 2994 1934 PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt